



KENTUCKY REAL ESTATE COMMISSION

500 Mero Street 2NE09
Frankfort, Kentucky 40601
(502) 564-7760
<http://krec.ky.gov>

COMPANY INFORMATION UPDATE FORM

Only the Principal Broker may complete this Form.

The Principal Broker must complete a different form for each company or registered branch office location.

1. COMPANY INFORMATION			
<input type="checkbox"/> Primary Company Location		<input type="checkbox"/> Registered Branch Office	
Company Name on File with KREC		6-Digit Office ID	
Address			Is this a new address? <input type="checkbox"/> Yes <input type="checkbox"/> No
City	State	Zip	
Company Phone			Is this a new phone? <input type="checkbox"/> Yes <input type="checkbox"/> No
Company Email			Is this a new email? <input type="checkbox"/> Yes <input type="checkbox"/> No
NOTE: This form be submitted with a Check or Money Order for \$10.00 made out to the Kentucky State Treasurer . You must complete a separate form for each company or branch office.			
I wish to: (Check all that apply)			} Finally, complete the Certification in Section 6.
<input type="checkbox"/> Update company information. Proceed to Section 2.			
<input type="checkbox"/> Close or Open a Company or Branch Office. Proceed to Section 3.			
<input type="checkbox"/> Add an alternate or assumed name. Proceed to Section 4.			

2. INFORMATION UPDATE			
Check all that apply. Attach additional page(s) as necessary.			
Change <input type="checkbox"/> Name or <input type="checkbox"/> D/B/A (choose one)			
Old name or D/B/A:		New name or D/B/A:	
<input type="checkbox"/> Phone Number Change		<input type="checkbox"/> Email Change	
What was your old number ?		What was your old email ?	
<input type="checkbox"/> Address Change			
What was your old address ?			
City	State	Zip	
<input type="checkbox"/> Escrow Account Change			
You must have an authorized official of your Kentucky bank complete Section 5, Certification of Escrow Account.			
<input type="checkbox"/> Change Designated Manager			
Name of new Designated Manager		License No.	
Signature X		Date	



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3. CLOSE OR OPEN A COMPANY OR BRANCH OFFICE

New Company* Branch Office of Existing Company

* If opening a **New Company**, you must have an authorized representative of your Kentucky bank **complete Section 5, Certification of Escrow Account.**

New Company or Branch Office Name

D/B/A

Phone

Email

Address

City

State

Zip

4. ADD AN ALTERNATE OR ASSUMED NAME

This Alternate or Assumed Name is for a: **Company** or **Group or Team**
If for a Group or Team, put the name and license number of the Team Leader in the space below.

Clearly Spell Out Alternate or Assumed Name Here

Leader Name

License No.

Leader Signature

Date

X

5. CERTIFICATION OF ESCROW ACCOUNT

This section may only be completed by an authorized representative of the Kentucky bank that manages the escrow account.

Name of Bank

Name on Account

Account Number

Routing Number

Address of Bank

City

Kentucky

Zip

I, _____, (print full name) certify that I am authorized to execute this document on behalf of the above-named Kentucky bank. I further certify that, based on the information provided to me in this form and its attachment(s), the above-referenced escrow account meets or exceeds the standards set forth in KRS 324.111.

Signature of Bank Representative

Date

X

6. CERTIFICATION OF PRINCIPAL BROKER

I hereby swear or affirm, under the penalty of perjury, that the statements and assertions made in this form and any attachments are true, complete and correct. I further authorize the Kentucky Real Estate Commission to investigate and confirm the information submitted in this Form and all attachments.

Signature of Principal Broker

Date

X